

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 59 | 1291 |
| FORMALITY REVIEW | M/T | 523 | 02/14/01 |
| RESPONSE FORMALITY REVIEW | jjh | 1030 | 5-25-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------------|---------|
| Final Original | 5/24/04 |
| 1 ✓ | |
| 2 ✓ | |
| 3 ✓ | |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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